U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFUL	LLY BEFORE PREPARING THIS REPORT.			
1. File Number U - 6/59	2. Fiscal Year Covered From:			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name LaShun Y. Lawson	Name Nat' / Football League Players Assa			
	Labor Organization File Number 265-533			
P.O. Box, Bldg., Room No., if any 5th Floor	P.O. Box, Building and Room Number, if any 5 th Floor			
Street 2021 L Street	Street 2021 L Street			
City Washington	city washington			
State District of Column ZIP Code + 4 2003 (p	State District of Columbia ZIP Code +4 20036			
5. Position in labor organization. Assistant Vice Pre	sident			
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests islons set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street	7.0. AHIOURIC			
City				

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Jashun Jausen

ZIP Code + 4

On 8-10-05

(201) 463-2200

Date

Telephone Number

State

Name of Person Filing LaShun Lawson		File Number U-				
B. Held an interest in or derived income or economic benefit with monetary versubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business tively seeking to represent, or	S				
8. Name and address of Business (including trade name, if any). Name Llectronic Arts Inc Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 209 Redwood 5 Nores Pkwy City Redwood City State CA ZIP Code + 4 94063	9. Business deals with: a. Labor Organizat b. Trust c. Employer	tion				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.a. Nature of such dealing Licensing Agriculture of Such Canalina and Artificial August 11.b. Approximate dollar value 12.a. Nature of interest held Dinney	reement mount exceeds \$ 1,000,000, lifto ascertain this amount of Cartislettiality restraints. cof such dealing.				
	12.b. Amount.	\$17.00	1			
2.b. Amount. C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.						
3.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4	14.a. Nature of payment.					
13.b. Is the Business an Employer or Consultant 2	14.b. Amount of payment.		1			

Name of Person Filing LaShun Lawson		File Number U-				
B. Held an interest in or derived income or economic benefit with monetary v substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actionary part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business tively seeking to represent, or retirectly to, or otherwise					
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10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing	g.				
Name	Licensing Agra	eement	The second of th			
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	The Dollar and It is difficult due to time and 11.b. Approximate dollar value 12.a. Nature of interest held Christmas Git	mountexceds to ascertain Carfidentiality of such dealing. or income received.	# 1,000,000 Mis amount restraints,			
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